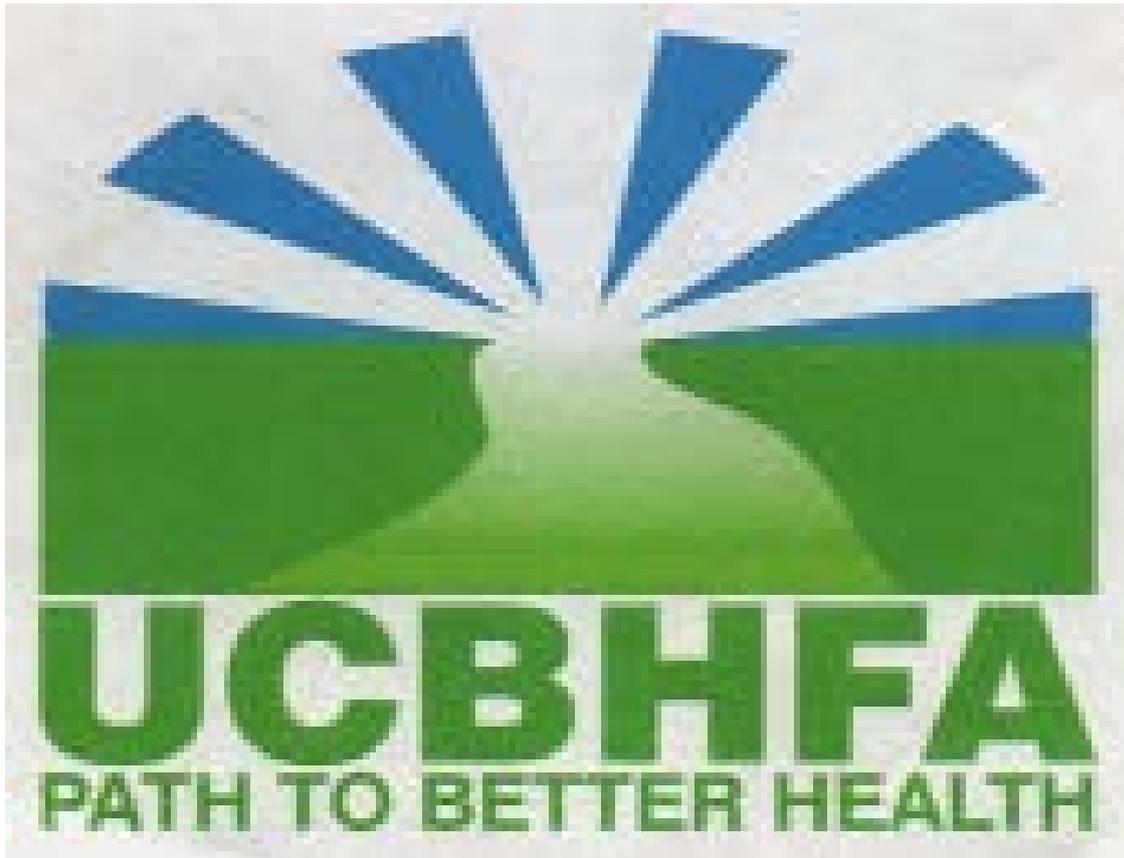


UGANDA COMMUNITY BASED HEALTH FINANCING
ASSOCIATION (UCBHFA)



ANNUAL REPORT – 2014

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LIST OF ACRONYMS

CHI -	Community Health Insurance
NHIS -	National Health Insurance Scheme
SHU -	Save for Health Uganda
UCBHFA -	Uganda Community Based Health Financing Association
UCMB -	Uganda Catholic Medical Bureau

INTRODUCTION

Uganda Community Based Health Financing Association (UCBHFA) has been in existence since 1998 and since its establishment has continued to pursue its mission of coordinating and supporting the establishment and management of sustainable community health financing initiatives in Uganda.

The organisation revised its strategic plan. It now has a five year plan covering 2013/2014 to 2017/2018.

Besides, during the year, the organisation changed its office premises' location and it's now found at Plot 580, Sekabaka Kintu Road – Mengo Rubaga.

This report highlights the activities carried out during 2014.

ACTIVITIES CONDUCTED DURING THE REPORTING PERIOD

Conducted the Community Health Insurance (CHI) National experience sharing forum

Under the theme 'Current status of CHI in Uganda; where are we; where do we want to be; the forum was organised for UCBHFA's stakeholders to share the CHI experiences including the CHI status and challenges in the country. It attracted 38 participants. The forum gave room for government representatives, partners and members of UCBHFA to; Share CBHF experiences and Strategize on how to address the challenges. And one of the major conclusions that came out of the meeting was to clearly state the position of the CHI fraternity on the draft National Health Insurance Scheme (NHIS) Bill and share it with all stakeholders.

Conducted Scheme managers' meetings

Two meetings were held in 2014 and both took place in Bushenyi district. With financial support from Health Partners, the meetings were held to enable scheme managers share information and learn from each other. The first meeting was held under a theme 'Enrolment of members in an environment where there is free healthcare' while the second one was themed as 'Managing Scheme information'. During both meetings, scheme managers shared what works, challenges faced and made suggestion, gave advice on strategies to each other for improvement. These meetings were one day and attracted all scheme managers from the different regions of Uganda.



Developed the CHI Position Paper

With financial support from Save for Health Uganda, UCBHFA and the CHI fraternity were able to develop a position paper. The process of developing the paper involved UCBHFA partners like Uganda Catholic Medical Bureau, Uganda Protestant Medical and World Health Uganda; and all its members. The development process used participatory methods led by a consultant. Consultative meeting and a retreat were carried out by the consultant to members and partners. Views about scheme members were got through the scheme managers during a half day meeting that was held in Bushenyi district. During those meetings, the consultant was able to come up with the CHI fraternity's position on CHI in the proposed National Health Insurance bill. The paper presented concerns in relation to CHI that were either not considered or taken into account in a different way than they should be according to the CHI experiences.



Presented the position paper to the Ministry of Health

The primary target for the developed position paper was the Ministry of Health. Therefore, when it was finalized, it was presented to the Minister for Health. During the meeting, the minister appreciated the CHI fraternity through their association and CHI promoter for the work done and also encouraged them to continue even in places where schemes don't exist. He promised to present the issues to the National Task force for further consideration. UCBHFA, Kabaale Diocese, UCMB and SHU were the organisations that represented partners and members at this event.

The secondary target for this paper was all the other Ugandans. Therefore, after presenting it to the Minister, it was shared with all CHI promoters, managers and some members to be able to share it with their networks including politicians, opinion and religious leaders among others.



UCBHFA Chaperons (in white shirt) handing over the paper to the Minister

Participated in partners meeting that were discussing health insurance

A number of partners conducted meetings that were in relation to health insurance. UCBHFA was invited and participated to such meetings. Among them were; Ministry of Gender, Labour and Social Development – to the social protection sector review workshop for the health insurance sub-sector; The Insurance Regulatory Authority of Uganda to discuss the proposed regulations for health membership organisation, health insurance organisations and micro insurance; and Africa Centre for Systematic Review

and Knowledge Translation to a research priority planning meeting to identify policy concerns about the proposed Uganda National Health Insurance Scheme (NHIS).

Recruited New members

Healthcare facilities showed interest in joining UCBHFA and with financial support from Health Partners, they were verified. The verification exercise recommended five as being eligible to join as members. These were; Ruharo Mission Hospital, Mayanja Memorial Hospital, Katungu Mission Hospital, Kikamba Health Center II and Kathel Medical Care. They are healthcare facilities that serve and manage schemes. Out of the eligible five members, three have fulfilled the requirements of being full members in UCBHFA. This brings the number of members to 25 as per the close of 2014.

More two members showed interest and membership forms were sent to them. A follow-up will be done during 2015.

CHALLENGES

UCBHFA's major challenge has remained limited financial resources. During the year, the organisation failed to secure external funding. However, there has been internal funding from members. Members like Health Partners and Save for Health Uganda have directly financed some of the activities done by the secretariat. Also, funds came in from members in form of membership fees and annual subscriptions.

Besides, looking at the details of the draft NHIS bill, CHI is mentioned as another scheme instead of a sub-scheme. Also, a lot of details are in line with social health insurance with little mention of CHI. This pose a threat of CHI being left out in the proposed bill.

Some schemes still have inadequate capacities to manage their technical issues. Coupled with limited resources for the secretariat to support them, it has left then technically unviable to run.

PLANNED WAY FORWARD

This year, the plan is to hold a general meeting and one of the major issues for discussion is to review the funding of the secretariat and come-up with sustainable ways of funding UCBHFA activities.

Plans have also been drawn to ensure that our position paper is published. More efforts will be put on ensuring that all stakeholders get to understand this paper.